

PTO/SB/21 (09-04)

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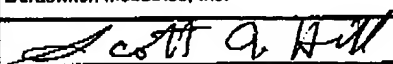
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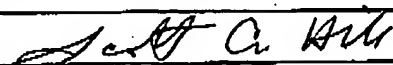
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|--|----------------------|------------------------|--|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 10/721,025 | RECEIVED CENTRAL FAX CENTER JUL 01 2005 |
| | Filing Date | 11-24-2003 | |
| | First Named Inventor | Robert J. Brion | |
| | Art Unit | 2832 | |
| | Examiner Name | Lincoln D. Donovan | |
| Total Number of Pages in This Submission | 7 | Attorney Docket Number | Dura 124 |

| ENCLOSURES (Check all that apply) | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks _____ | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|-------|
| Firm Name | Duraswitch Industries, Inc. | | |
| Signature |  | | |
| Printed name | Scott A. Hill | | |
| Date | 07-01-2005 | Reg. No. | 48899 |

CERTIFICATE OF TRANSMISSION/MAILING

| | | | |
|---|---|------|------------|
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| Signature |  | | |
| Typed or printed name | Scott A. Hill | Date | 07-01-2005 |

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | | |
|-------------|----------------------------------|---|---------------------|
| Inventor: | Robert J. Brilon |] | Lincoln D. Donovan |
| Serial No.: | 10/721,025 |] | Examiner |
| Filed: | November 24, 2003 |] | |
| For: | Dual Output Magnetically Coupled |] | Group art Unit 2832 |
| | Pushbutton Switch |] | |

Commissioner for Patents
Alexandria, Virginia 22313-1450
Fax phone 703-872-9306

REPLY TO NON-FINAL OFFICE ACTION

Sir:

In response to the Office action of March 02, 2005, please consider the attached remarks and arguments that are responsive to the rejection of claims 1, 3-10, and 12-14 of the above-identified application. Claims 15 and 19-20 are allowed. Claim 6 is objected to, but a favorable disposition with regard to the rejected base claim should cure the objection.

Remarks/Arguments begin on page 2 of this paper.